1411443

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

| OMD | APPROVA | |
|-----|---------|--|
| | | |

OMB Number: 3235-0076 Expires: March 30, 2008 Estimated average burden hours per form......1

| SEC USE ONLY | | | | | |
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| Prefix | Serial | | | | |
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| DAŢ | E RECEIVED | | | | |
| | | | | | |

| Name of Offering (check if this is an amendme | nt and name has chang | ed, ar | nd indicate change.) | • | | | | |
|---|---------------------------------------|---------------|------------------------|---|-------------|-------------------|----------|------------|
| Series A Preferred Stock Financing | | | | | | | | |
| Filing Under (Check box(es) that apply): | ☐ Rule 504 | | Rule 505 | ⊠ Rule 506 | [| Section 4(6) | Dτ | ILOE |
| Type of Filing: | | X | New Filing | | | Amendment | | |
| | A. BASI | C ID | ENTIFICATION DA | ATA | | | | |
| 1. Enter the information requested about the iss | uer | | | | | | | |
| Name of Issuer (☐ check if this is an amendment | and name has changed, | , and | indicate change.) | | | | | |
| Public Engines, Inc. | | | | | | | (5) | |
| Address of Executive Offices | (Number and St | reet, (| City, State, Zip Code) | Telephone Nun | nber (Inc | luding Area Cod | e) [5] | |
| 343 West 400 South, Salt Lake City, UT 8 | 4101 | | | (801) 456-15 | 55 | | | |
| Address of Principal Business Operations (Number | Code) | Telephone Nun | nber (Inc | luding Area Cod | GEIVE | 3.0 | | |
| (If different from Executive Offices) | | | Į. | ROCES | SED | | EGE! | |
| Brief Description of Business | · · · · · · · · · · · · · · · · · · · | | L' e a F | 110000 | | P | | a A |
| Software development. | | 4. | A 11 1 1 1 1 | SEP 0 7 2 | 1 07 | ワ | 163 | |
| Type of Business Organization | | | [| - U | | | 4 | 77 |
| ☑ corporation ☐ lim | ited partnership, alread | y forr | ned | THOMSO | N 🗆 ot | her (please speci | fy): | \ / |
| ☐ business trust ☐ lim | ited partnership, to be f | forme | d | FINANCIA | ۱L | | | * |
| | | N | | Year | | | | |
| Actual or Estimated Date of Incorporation or Orga | mization: | 0 | 4 . (| 07 | | | | |
| Jurisdiction of Incorporation or Organization: (| Enter two-letter U.S. Po | octal ' | Service abbreviation : | for State: | ⊠ A¢ | ctual | ☐ Estima | ted |
| | CN for Canada; FN for | | | ior state. | | | DE | |

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name 6the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
 - Each promoter of the issuer, if the issuer has been organized within the past five years;
 - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer.
 - Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
 - Each general and managing partner of partnership issuers.

| Check Box(es) that Apply: | Promoter | ☑ Beneficial Owner | Executive Officer | ☑ Director | General and/or Managing Partner |
|---------------------------|---------------------------------------|--------------------------------|-------------------------------|-------------------|-----------------------------------|
| Full Name (Las | t name first, if individual) | | | . = | ··· |
| Whisenant, G | | | | | |
| | | Street, City, State, Zip Code) | | | |
| c/o Public En | gines, Inc., 343 West 400 | South, Salt Lake City, UT | 84101 | | |
| Check | ☐ Promoter | Beneficial Owner | ☐ Executive Officer | ☑ Director | ☐ General and/or |
| Box(es) that Apply: | | | | | Managing Partner |
| • | name first, if individual) | | | | |
| Ahlstrom, Pa | | | | | |
| | idence Address (Number and | | 0-14.1 -1 614 - 124 1 - 04141 | | |
| Check Boxes | | | Salt Lake City, Utah, 84121 | | |
| that Apply: | ☐ Promoter | Beneficial Owner | Executive Officer | ☐ Director | ☐ General and/or Managing Partner |
| | t name first, if individual) | | o hite | | Managing Farmer |
| Faulconer, C | · | | | | |
| | idence Address (Number and | Street City State 7 in Code) | . | | |
| | | South, Salt Lake City, UT | 84101 | | |
| Check Boxes | Promoter | Beneficial Owner | ☐ Executive Officer | Director | ☐ General and/or |
| that Apply: | | _ beneficial Owner | Za zacounto omoci | — <i>D</i> | Managing Partner |
| Full Name (Las | t name first, if individual) | | | | |
| vSpring III, L | | | | | |
| Business or Res | idence Address (Number and | Street, City, State, Zip Code) | | | |
| c/o vSpring C | apital, 2795 East Cottony | vood Parkway, Suite 360, S | Salt Lake City, Utah, 84121 | | |
| Check Boxes | ☐ Promoter | ☐ Beneficial Owner | ☐ Executive Officer | ☐ Director | General and/or |
| that Apply: | | | | | Managing Partner |
| Full Name (Las | t name first, if individual) | | | | |
| Business or Res | idence Address (Number and | Street, City, State, Zip Code) | · | ···· | |
| | | | | | |
| Check Boxes | Promoter | ☐ Beneficial Owner | ☐ Executive Officer | Director | ☐ General and/or |
| that Apply: | | | | | Managing Partner |
| Full Name (Las | t name first, if individual) | | | | |
| Business or Res | idence Address (Number and | Street, City, State, Zip Code) | | | |
| | | · | · | | |
| Check Boxes that Apply: | ☐ Promoter | ☐ Beneficial Owner | Executive Officer | ☐ Director | General and/or Managing Partner |
| Full Name (Las | t name first, if individual) | | . ,,,, | | <u> </u> |
| Business or Res | idence Address (Number and | Street, City, State, Zip Code) | | | |
| - | · · · · · · · · · · · · · · · · · · · | | | | <u></u> |
| | | | | | |

| | | | | - | | | | | | | | |
|--------|---|-------------------------------------|------------------|--------------------------------|---|------------------------------|---|--------------------------------------|---|--------------|---|---|
| 1. | Has the issuer sol | ld, or does the is | ssuer intend to | sell, to nor | accredited in | vestors in thi | s offering | ? | | | Yes N | o <u>X</u> |
| | | | | Answer | also in Appen | dix, Column | 2, if filing | g under ULOE | , | | | |
| 2. | What is the minir | mum investmen | t that will be a | ccepted fro | m any individ | ual? | •••••• | | | | N/A | |
| 3. | Does the offering | g permit joint ow | vnership of a s | ingle unit?. | | ••••• | | | , | •••••• | Yes N | o <u>X</u> |
| | Enter the inform solicitation of pu registered with th broker or dealer, | irchasers in con ie SEC and/or w | nection with s | sales of sec tates, list th | curities in the | offering. If broker or de | a person | to be listed i | s an associate | ed person or | agent of a | broker or dealer |
| Full | Name (Last name | first, if individ | ual) | | | | | | | | | |
| N/A | | | | | | | | | | | | |
| Busi | ness or Residence | Address (Num | ber and Street, | City, State | , Zip Code) | | · ••• | | | | | |
| Nam | e of Associated B | Iroker or Dealer | | | | | | | | | | |
| 144411 | e of Associated D | noxer or Dealer | | | | • | | | | | | |
| State | s in Which Person | n Listed Has So | licited or Inten | ds to Solici | t Purchasers | · <u>.</u> | | | | <u> </u> | | |
| (Che | ck "All States" or | r check individu | al States) | | *************************************** | | | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | *************************************** | | | All States |
| [AL] | [AK] | [AZ] | [AR] | [CA] | [CO] | [CT] | [DE] | IDC} | [FL] | [GA] | [HI] | [ID] |
| ĮILĮ | iN | []A[] | [KS] | [KY] | [LA] | IMEL | · [MD] | [MA] | JMIJ | [MN] | [MS] | [MO] |
| IMT |] [NE] | [NV] | [NH] | [NJ] | [NM] | [NY] | [NC] | ND | ЮН | [OK] | (OR) | [PA] |
| {RI} | (SC) | (SD) | [TN] | (TX) | (UT) | (VT) | (VA) | ĮVΑĮ | ĮWVĮ | ĮWij | (WY) | (PR) |
| Full | Name (Last name | first, if individ | ual) | | | | | | | | | |
| D | D '1 | | 1.0 | Circ. Surve | 7' (1-1-) | | | | | | | . <u> </u> |
| Busi | ness or Residence | Address (Num | ber and Street, | City, State | , Zip Code) | | | | | | | |
| Nam | e of Associated B | Broker or Dealer | | | | | | | | | <u> </u> | |
| State | s in Which Person | n Listed Has So | licited or Inter | nds to Solic | it Purchasers | | | | | | | |
| (Che | ck "All States" or | r check individu | al States) | | | | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | ****************** | | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | All States |
| [AL] | [AK] | [AZ] | [AR] | [CA] | [CO] | [CT] | (DE) | [DC] | [FL] | [GA] | [HI] | [ID] |
| (IL) | [IN] | JIA] | [KS] | [KY] | [LA] | [ME] | [MD] | [MA] | [MI] | [MN] | [MS] | [MO] |
| ĮМТ | l [NE] | ĮΝVĮ | [NH] | (NJ) | [NM] | [NY] | [NC] | [ND] | [ОН] | [OK] | [OR] | [PA] |
| [RI] | [SC] | (SD) | [TN] | [TX] | [UT] | [VT] | [VA] | [VA] | [WV] | [WI] | [WY] | [PR] |
| Full | Name (Last name | first, if individu | ual) | | | | | | | | | · · · · · · · · · · · · · · · · · · · |
| Busi | ness or Residence | Address (Num | ber and Street, | City, State, | , Zip Code) | | | | | | | , , , , , , , , , , , , , , , , , , , |
| | | | | | | | | | | | | |
| Nam | e of Associated B | Broker or Dealer | | | | | | | | | | |
| - | | | | | 1 | Vol. | • | | | | | |
| | es in Which Person | | | | | , , | | | | | | |
| | ck "All States" of | | • | | | | | | | | | All States |
| [AL] | • | | [AR] | [CA] | [CO] | [CT] | DE | [DC] | (FL) | [GA] | (HI) | [ID] |
| JILJ | [IN] | [IA] | [KS] | [KY] | [LA] | [ME] | MD | [MA] | [MI] | [MN] | [MS] | [MO] |
| IMT | | | [NH] | נמן | [NM] | INYI | [NC] | [ND] | ЮН | [OK] | [OR] | [PA] |
| [RI] | [SC] | [SD] | [TN] | [TX] | [UT] | ĮVTĮ | [VA] | [VA] | [WV] | [WI] | ĮWYJ | [PR] |

B. INFORMATION ABOUT OFFERING

| | C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND | USE OF PROCEEDS | |
|----|---|---|--|
| 1. | Enter the aggregate offering price of securities included in this offering and the total amount already transaction is an exchange offering, check this box \(\Pi\) and indicate in the columns below the amounts of to Type of Security | he securities offered for ex Aggregate | change and already exchang Amount Already |
| | Debt | Offering Price | Sold \$ |
| | Equity | | \$ <u>1,044,998.91</u> |
| | | \$ <u>294,999.11</u> | 3 <u>1,044,998.91</u> |
| | Convertible Securities (including warrants) | \$ <u>294,999.</u> 11* | \$ <u>1,044,998.91</u> * |
| | Destacable laterate | • | c |
| | Partnership Interests Other (Specify) | \$ | <u> </u> |
| | Total | 5 | 5 1 044 000 01* |
| | 1 V(a) | \$ 294,999.11° | \$ <u>1,044,998.91</u> * |
| | Answer also in Appendix, Column 3, if filing under ULOE. | | |
| 2. | Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero." | | |
| | | Number | Aggregate |
| | | Investors | Dollar Amount |
| | | | of Purchases |
| • | Accredited Investors | 4 | \$ <u>1,044,998.91</u> |
| | Non-accredited Investors | | \$ |
| | Total (for filings under Rule 504 only) | | \$ |
| | Answer also in Appendix, Column 4, if filing under ULOE. | • | |
| 3. | If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C- Question 1. | | |
| | | Type of | Dollar Amount |
| | | Security | Sold |
| | Type of Offering | | |
| | Rule 505 | | s |
| | Regulation A | | \$ |
| | Rule 504 | | \$ |
| | Total | | \$ |
| 4. | a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. | _ | |
| | Transfer Agent's Fees | 0 | 2 |
| | Printing and Engraving Costs | 0 | \$ |
| | Legal Fees | Œ | \$ <u>42,000</u> |

Accounting Fees Engineering Fees.....

Sales Commissions (specify finders' fees separately).....

Other Expenses (Identify)_____

Total.....

\$42,000

^{*} includes \$102,323.29 in cancellation of indebtedness

| Enter the difference between the aggregate offering price given in responsin response to Part C – Question 4.a. This difference is the "adjusted ground to the contract of the co | se to Part C - Question 1 and total expenses furnish ss proceeds to the issuer" | ed <u>\$ 252,999.11</u> |
|--|--|----------------------------------|
| Indicate below the amount of the adjusted gross proceeds to the issuer used o If the amount for any purpose is not known, furnish an estimate and check payments listed must equal the adjusted gross proceeds to the issuer set forth | the box to the left of the estimate. The total of t | |
| | Payment to Officers | • |
| Salaries and fees | Directors, & Affiliate | |
| | | |
| urchase of real estate | | |
| urchase, rental or leasing and installation of machinery and equipment | _ v | |
| onstruction or leasing of plant buildings and facilities | — | _ |
| equisition of other businesses (including the value of securities involved in this exchange for the assets or securities of another issuer pursuant to a merger) | | _ |
| epayment of indebtedness | | |
| /orking capital | | |
| ther (specify): | | <u></u> |
| | | |
| olumn Totals | s s s | |
| otal Payments Listed (column totals added) | - * | <u>\$ 252,999.11</u> 2,999.11 |
| • | ملاط في فيا | .,,,,,,,,,, |
| | L SIGNATURE | |
| The issuer had duly caused this notice to be signed by the undersigned duly author undertaking by the issuer to furnish to the U.S. Securities and Exchange Common-accredited investor pursuant to paragraph (b)(2) of Rule 502. | | |
| 1 7 | pature | Date |
| , 9 | meg Wii smant | Aug., 29., 200 |
| ame of Signer (Print or Type) Titl | e of Signer (Print or Type) | |
| - | the state of the s | |

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

| | E. STATE S | GNATURE | | - | |
|-----|--|---|------------|------------|----------|
| 1. | . Is any party described in 17 CFR 230.262 presently subject to any of the desqualification prov isions of such rule? | | | | , |
| | See Appendix, Columi | 5, for state response. | • | | |
| 2. | The undersigned issuer hereby undertakes to furnish to the state administrator such times as required by state law. | , | | 239.500 |)) at |
| 3. | The undersigned issuer hereby undertakes to furnish to any state administrators | upon written request, information furnished by the issuer to | offerees. | | |
| 4. | The undersigned issuer represents that the issuer is familiar with the condition (ULOE) of the state in which this notice is filed and understands that the issuer conditions have been satisfied. | claiming the availability of this exemption has the burden of | establishi | ng that ti | hese |
| | e issuer has read this notification and knows the contents to be true and has dul son. | y caused this notice to be signed on its behalf by the under | signed dul | y author | ized |
| lss | uer (Print or Type) Sig | nature | Date | | |
| Pι | ıblic Engines, Inc. | Grea Wishend | AUG. | 29, | 200 |
| Na | me (Print or Type) | le (Print or Type) | | | |
| G | Greg Whisenant Chief Executive Officer and President | | | | |

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bar typed or printed signatures.